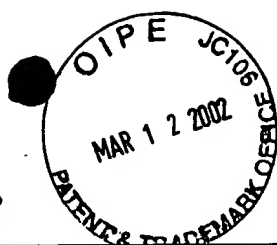


BAKER BOTTS LLP



#7
Linda
4/18/02

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) A33626; 067252.0105
In re Application of Smith et al.		
Application Number 09/611,419		Filed July 6, 2000
For RECOMBINANT VACCINE AGAINST * see attached		
Group Art Unit 1645		Examiner V. Portner

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

☐ One month (37 CFR 1.17(a)(1))

☐ Two months (37 CFR 1.17(a)(2))

☐ Three months (37 CFR 1.17(a)(3))

☐ Four months (37 CFR 1.17(a)(4))

☒ Five months (37 CFR 1.17(a)(5))

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$_____.

☒ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-4377.

I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor

☐ assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record.

☐ attorney or agent under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a)_____.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

March 5, 2002

Date

PTO Reg No.: 32,300

Rochelle K. Seide

Signature

Rochelle K. Seide, Ph.D.

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

RECEIVED

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TECH CENTER 1600/2900

\$ _____

\$ _____

\$ _____

\$ 1,960